HealthShare *Montana*

Montana's Designated Health Information Exchange Organization

Implementing a Montana vision for

Health Information Exchange

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Goals of HealthShare Montana

◘ Deploy secure messaging for provider communication and stage 1 MU requirement for exchange of clinical care summaries

◘ Deploy robust exchange to improve healthcare quality by making patient information available at the point of care

◘ Develop web portal into provider tool for improved communication and single point of access to healthcare apps

◘ Query de-identified data to enable healthcare quality improvement, decrease healthcare costs, or meet other population health improvement goals.

Governance

- Established in Dec. 2005 as Montana HIT Task Force, operating as HealthShare Montana since 2007
- 501(c)3 Non-profit headquartered in Billings, MT
- Designated State Health Information Exchange since 2009
- Directed by 21 member board which includes healthcare providers, large and small hospitals, patient advocates, employers, payers, the State of Montana, and more
- Sub-committees include governance, privacy and security, clinical, technical, and financial

Infrastructure

- Hybrid Centralized Model clinical data repository (CDR)
- This is not a PACS system and doesn't include a record locator service
- Role based security to access a SSL encrypted web portal.
- Data is stored in a tier 4 (highest level) data storage facility with real time 24/7/365 monitoring
- Web access and uptime are monitored from 4 global stations every 15 minutes
- 24 hour recovery window in the event of a disaster
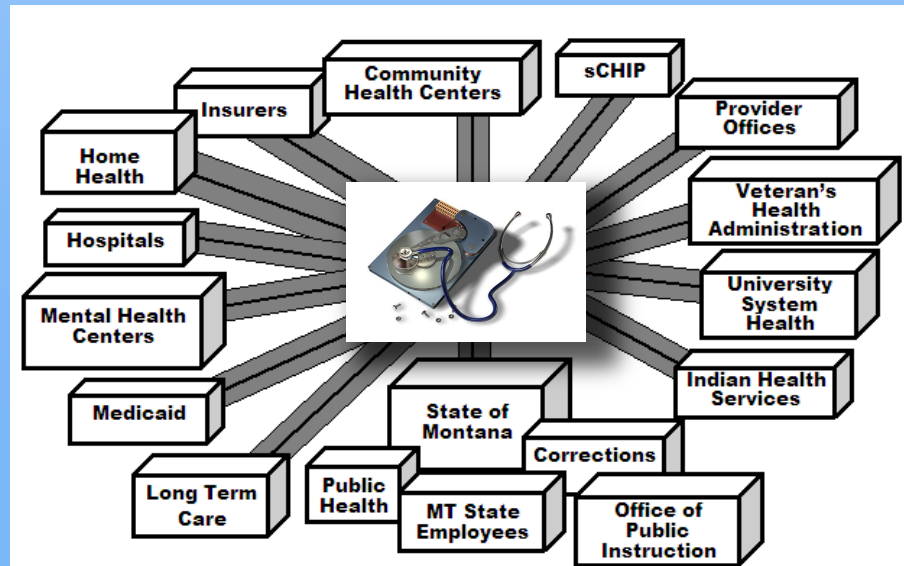- Full audit trail and audit reporting

Privacy

- System fully adheres to HIPAA and HITECH
- Participation agreements and Business Associate Agreements will be in place
- Patient consent model framework is Opt-Out with complete policies still being created
- A complete audit log is kept to track every add, view, and modification of data

Secure Messaging

- Patient centered, Provider to Provider communication
- Meets requirements for stage 1 meaningful use for exchange of clinical care summaries
- Messages can have attachments – up to 10mb
- E-Forms (available as an add-on) allows standardization of workflow such as radiology/lab/admit requests
- Utilizes Provider Directory to ensure secure communication to the correct care provider
- Fully searchable by date, provider, or patient

Full Exchange with CDR

- Clinical Data Repository stores data typically found in a CCD or CCR document
- Allows clinical decision support and rapid patient lookup
- Interfacing utilizes a build once, use many times philosophy to reduce cost for all in healthcare

Facility Priority List

- First facilities will be those that were part of HSM Pilot
- Next priority is large healthcare systems ready to participate (PPS, CAH, CHC, etc.)
- As other providers and groups are ready to participate they will be incorporated
- Electronic lab results, either through the secure messaging system or a full interface is also a high priority
- All providers are welcome to sign up for secure messaging to meet stage 1 MU as soon as it is available

How to Sign Up

- ◘ Secure messaging sign up will be available by Summer 2011
- ◘ Use of the secure messaging system is voluntary but providers and their staff must agree to follow the site Terms and Conditions
- ◘ HSM will soon be contacting priority facilities to engage them in discussions around interfacing their EHR and utilizing the full exchange functionality
- ◘ All facilities and providers required to sign Business Associate Agreements

Providers

- Reduced facility and provider cost to interface to other healthcare systems
- Access to secure patient medical information at the point of care
- Alerts for preventative medicine and access to clinical decision support tools
- Ability to create community of care by sharing pertinent healthcare data
- Reduced practice cost by utilizing automation for required reporting

Facilities

- By acting as a central hub, HSM can provide faster, automated reporting to public health and other entities reducing staff time and duplicate entry

- HSM can provide significant aggregated data based on a wider demographic than is currently available from any one source

- HSM is seeking additional ways to assist facilities meet their data transport and reporting requirements

Patients

- Providers can make better healthcare decisions if they have all the data
- Emergency providers can access patient information, even if the patient can't speak
- Preventative health reminders save money and improve patient health
- For those with multiple providers, especially the elderly or those with chronic conditions, coordination of their healthcare across all providers will improve their health
- Improved dissemination of data – allows data transfer to a personal health record (PHR) with patient consent

Other Tasks

- Improve technology at CAHs – ensure they can connect
- Assist providers update Notice of Privacy Practices
- Educate providers and their staff about HIE
- Ensure providers have access to a low cost, certified EHR capable of meeting MU
- Electronic delivery of lab results to providers
- Alerts and reminders at the point of care
- Clinical Decision Support tools at the point of care
- Ensure access to electronic prescription software and pharmacies capable of receiving electronic prescriptions
- Assist providers in meeting Stage 1 MU
- Improve provider workflow and communication through web portal

Billable Services

- Interfaces to HSM's exchange – a low cost alternative to more expensive vendor interfaces
- E-Forms – custom forms available to improve communication between facilities
- Workflow applications such as eRx, e-Lab Order, certified modular EHR, and more will be available with single sign-on
- Custom reports
- Additional customization can be quoted

Availability

- Secure messaging – suitable for stage 1 meaningful use – free to healthcare providers and their staff – as early as Summer 2011
- Online applications such as eRx, Lab CPOE, Certified Modular EHR, and others late Summer or Fall 2011, cost TBD
- Full HIE services including full interfacing available late summer or fall 2011, cost dependent on facility data customization and requirements

Contact HealthShare Montana

We would love to hear from you about utilizing this new service or any questions or concerns you may have. Please contact us using the information below or through our website.

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